Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

		Docum	ent Page 1 of 4:	3	
Fill in this infor	mation to identify your	case:			
Debtor 1	Robert T Carlson				
	First Name	Middle Name	Last Name		
Debtor 2	Mary M Carlson				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA		
Case number _					
(if known)					☐ Check if this is an
					amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	850,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	39,426.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	889,426.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	544,312.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	9,172.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	219,660.00
	Your total liabilities	\$	773,144.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,442.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,655.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 2 of 43

Debtor 1	Robert T Carlson	Bocament	1 age 2 01 40		
Debtor 2	Mary M Carlson		Case number (if known)		

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	1

0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	9,172.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,172.00

	Case	e 17-03874-hb	Doc 10		ed 08/17/ cument	/17 Ente Page 3		7/17 10:2	9:16 [	Des	c Main
Fill	in this inform	nation to identify you	r case and th	is filinç	g:						
Deb	otor 1	Robert T Carlso	n								
		First Name	Middle	Name		Last Name					
	otor 2	Mary M Carlson									
(Spo	use, if filing)	First Name	Middle	Name		Last Name					
Unit	ted States Ba	inkruptcy Court for the:	DISTRICT	OF SOL	UTH CAROLI	INA					
Cas	se number _					_					Check if this is an amended filing
Of	ficial Fo	rm 106A/B									
Sc	chedul	e A/B: Prop	perty								12/15
Part  1. Do	Describe o you own or I  No. Go to Par	Each Residence, Buildir	g, Land, or Oth	ner Real	l Estate You O	wn or Have an g, land, or simil	Interest In ar property?	s, write your na	ame and cas	e num	nber (if known).
1.1	106 FIDE	DINK WAY		What		ty? Check all that	apply				
106 FIRE PINK WAY  Street address, if available, or other description			Duplex or multi-unit building the amount of the condensition that the amount of the condensition that the condensition that the condensition of the condensition that the conden		the amount of	educt secured claims or exemptions. unt of any secured claims on <i>Schedul</i> who Have Claims Secured by Prop		ns on <i>Schedule D:</i>			
	Landrum	SC 29	356-0000			d or mobile hom	е	Current valuentire prope			rrent value of the rtion you own?
	City	State	ZIP Code			roperty		\$850	0,000.00		\$850,000.00
											wnership interest
				Who	has an interes	st in the proper	ty? Check one	à life estate	), if known.	ancy	by the entireties, or
	0							Fee simp	ie		
	Spartanbu	urg			Debtor 2 only	/					
	County				Debtor 1 and	Debtor 2 only					

lacksquare At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

TMS#0646010100215

PURCHASED: 08/01/2002 FOR \$900,000

**COUNTY VALUE: \$850,000** 

NOTE: HOUSE IS ON THE MARKET

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$850,000.00

Check if this is community property

(see instructions)

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 4 of 43

3. <b>C</b> a			on		Case number (if known)	
	rs, vans,	trucks, tracto	ers, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	LEXUS		Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	ES300		☐ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	1999		Debtor 2 only		, , ,
			167K	_	Current value of the	Current value of the
		mate mileage:	APPROX	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	C70E0	At least one of the debtors and another		
	VIN#J	Г88F28GOX5	007030	☐ Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
3.2	Make:	Dodge		Who has an interest in the property? Check one	Do not deduct secured (	claims or exemptions. Put
		CARAVAN	LIMITED	Прин		red claims on Schedule D: aims Secured by Property.
	Model: Year:	EDITION 2004		Debtor 1 only	Creditors who have Cit	airiis Secured by Froperty.
			93K	Debtor 2 only	Current value of the	Current value of the
		nate mileage: _ formation:		■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	entire property?	portion you own?
		DGP44L54S8	9132	At least one of the deptors and another		
				☐ Check if this is community property	\$3,500.00	\$3,500.00
Δ	Yes	ollar value of th	he partion you ow	n for all of your entries from Part 2, including a	any entries for	
	dd the do			n for all of your entries from Part 2, including a		\$6,000.00
.pa	dd the do	have attached be Your Persona	d for Part 2. Write	ems		
.pa art :	dd the do	have attached be Your Persona	d for Part 2. Write	that number here		\$6,000.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
.pa	Description ou own of the complex complex:	have attached be Your Persona or have any leg goods and ful	d for Part 2. Write of all and Household Ite gal or equitable interpretable interpreta	ems		Current value of the portion you own? Do not deduct secured
.part :	Description ou own of the complex complex:	be Your Personal or have any leg goods and ful Major appliance escribe	d for Part 2. Write of al and Household lite gal or equitable ind rnishings es, furniture, linens	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
eart:	Description ou own of the description of the description ou own of the description of the	be Your Personal or have any leg goods and ful Major appliance escribe	d for Part 2. Write of all and Household Ite gal or equitable interpretable interpretable in the gal or equitable in the gal or equi	ems terest in any of the following items? that number here		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property

page 2

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Page 5 of 43 Document Debtor 1 Robert T Carlson Mary M Carlson Debtor 2 Case number (if known) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... Approx 160 various books to include: Agatha Christie books \$650.00 (Complete sets) Artwork: \$5,376.00 22 Paintings - See attached Painting with values 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No ■ Yes. Describe..... 2 sets -Golf Clubs Men's Callway Tayormade set W/ Bag & Putter (15-20 years old) \$300.00 Women's Ping Zing/Taylormade mixed set W/ bag & Putter 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$1,500.00 costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ No Yes. Give specific information.....

Schedule A/B: Property

Kawai Electronic Piano W/ bench Piano is Approx 28 years old

Ebay value: \$1149.00

Official Form 106A/B

\$1,150.00

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 6 of 43

	ebtor 1 ebtor 2	Robert T Carlson Mary M Carlson	Case number (if known)	
15		the dollar value of all of your entries from Part 3. Write that number here	eart 3, including any entries for pages you have attached	\$20,476.00
Pa	art 4: De	scribe Your Financial Assets		
		vn or have any legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No	oles: Money you have in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petit	ion
			Cash	\$50.00
17.		its of money oles: Checking, savings, or other financial acco	punts; certificates of deposit; shares in credit unions, brokerage s with the same institution, list each.	houses, and other similar
	☐ Yes		Institution name:	
18.	Examp	, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with bro	•	
19.	joint v ■ No	ublicly traded stock and interests in incorporenture  Give specific information about them	orated and unincorporated businesses, including an interes % of ownership:	st in an LLC, partnership, and
20.	Negoti Non-ne ■ No	nment and corporate bonds and other nego iable instruments include personal checks, cas	·	
21.	Examp	ment or pension accounts  oles: Interests in IRA, ERISA, Keogh, 401(k), 4  List each account separately.  Type of account:	403(b), thrift savings accounts, or other pension or profit-sharing  Institution name:	plans
		IRA	IRA (2 accounts)	
			no balance at this time	\$0.00
22.	Your s		o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compa	nies, or others
			Institution name or individual:	
23.	Annuit	ies (A contract for a periodic payment of mone	ey to you, either for life or for a number of years)	
0.4	☐ Yes		usalified ARLE program, or under a qualified state tuition pro	

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 7 of 43 Debtor 1 Robert T Carlson Debtor 2 Mary M Carlson Case number (if known) 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses □ No ■ Yes. Give specific information about them... \$0.00 Co-Debtor has a law license in Illinois Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Term Life Insurance** \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Debtor 1 Debtor 2 Robert T Carlson Mary M Carlson Case number (if known)

Debto	r 2	Mary M Carlson			Case number (if known)	
		ontingent and unliquidated	claims of every nature, inclu	ıding counterclaims o	of the debtor and rights to	set off claims
_ `	Yes.	Describe each claim				
			Potential Refund of Go	If Iniation fees of \$	12500 - CLIFFS	
			COMMUNITY			\$12,500.00
35. <b>An</b>	y fin	ancial assets you did not alr	eady list			
	Yes.	Give specific information				
36. A	Add tl	he dollar value of all of your	entries from Part 4. includin	ng any entries for pag	es vou have attached	
		rt 4. Write that number here.	•		•	\$12,550.00
Part 5:	Des	scribe Any Business-Related Pro	perty You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
	-	wn or have any legal or equitable	e interest in any business-relat	ed property?		
■ N	lo. Go	to Part 6.				
☐ Y	es. G	o to line 38.				
Part 6:		scribe Any Farm- and Commercia ou own or have an interest in farmla		Own or Have an Interes	st In.	
	ıı ye	out of have an interest in familia	and, not it in i art i.			
46. <b>Do</b>	you	own or have any legal or eq	uitable interest in any farm-	or commercial fishin	g-related property?	
	No.	Go to Part 7.				
	Yes.	Go to line 47.				
		_				
Part 7:		Describe All Property You Own	or Have an Interest in That You	u Did Not List Above		
53. <b>Do</b>	you	have other property of any I	kind you did not already list	?		
	,	les: Season tickets, country cl	ub membership			
•	Yes. (	Give specific information				
		various	s hand and gardening too	ols		\$400.00
54 <b>A</b>	\	he dollar value of all of your	entries from Part 7 Write th	at number here		\$400.00
J4. <i>F</i>	iuu ii	ne donar value of all of your	entres from Fart 7. Write th	at number nere		<b>\$400.00</b>
Part 8:		List the Totals of Each Part of the	nis Form			
55. <b>P</b>	Part 1	: Total real estate, line 2				\$850,000.00
		: Total vehicles, line 5		\$6,000.00		φοσυ,υυυ.υυ
		: Total personal and househ	old items. line 15	\$20,476.00		
		: Total financial assets, line		\$12,550.00		
		: Total business-related pro		\$0.00		
		: Total farm- and fishing-rela	•	\$0.00		
		: Total other property not lis		\$400.00		
62. <b>T</b>	[otal	personal property. Add lines	56 through 61	\$30,426,00	Copy personal property t	otal \$20.426.00
υ <b>∠</b> . Ι	Jiai	personal property. Add lines	oo aalougii o i	\$39,426.00	Copy personal property t	total \$39,426.00
63. <b>T</b>	otal	of all property on Schedule	<b>VB</b> . Add line 55 + line 62			\$889,426.00

Official Form 106A/B Schedule A/B: Property page 6

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Page 9 of 43 Document

Fill in this information to identify your case:							
Debtor 1	Robert T Carlson						
	First Name	Middle Name	Last Name				
Debtor 2	Mary M Carlson						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA				
Case number							
(if known)					☐ Check if this is an amended filing		

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	Exempt							
1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B	or any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you cla portion you own		ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Check only one box for each exemption. Schedule A/B							
	106 FIRE PINK WAY Landrum, SC 29356 Spartanburg County TMS#0646010100215	\$850,000.00		\$110,200.00  100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(1)				
	PURCHASED: 08/01/2002 FOR \$900,000								
	<b>COUNTY VALUE: \$850,000</b>								
	NOTE: HOUSE IS ON THE MARKET Line from Schedule A/B: 1.1								
	1999 LEXUS ES300 167K APPROX	\$2,500.00		\$2,500.00	S.C. Code Ann. §				
	miles VIN#JT88F28GOX567858 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(2)				

\$3,500.00

2004 Dodge CARAVAN LIMITED

**EDITION 93K miles** 

VIN#2DGP44L54S89132

Line from Schedule A/B: 3.2

S.C. Code Ann. §

15-41-30(A)(2)

\$3,500.00

100% of fair market value, up to

any applicable statutory limit

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

Robert T Carlson Document Page 10 of 43

De	eptor 2 Wary W Carison			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	household furniture, appliances	\$10,000.00		\$8,450.00	S.C. Code Ann. §
	Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(3)
	electronics Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	S.C. Code Ann. § 15-41-30(A)(3)
				100% of fair market value, up to any applicable statutory limit	· ///
	Approx 160 various books to include: Agatha Christie books (Complete	\$650.00		\$650.00	S.C. Code Ann. § 15-41-30(A)(7) unused
	sets) Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	homestead
	Artwork:	\$5,376.00		\$5,376.00	S.C. Code Ann. § 15-41-30(A)(7) unused
	22 Paintings - See attached Painting with values Line from Schedule A/B: 8.2			100% of fair market value, up to any applicable statutory limit	homestead
	2 sets -Golf Clubs Men's Callway Tayormade set W/ Bag	\$300.00		\$400.00	S.C. Code Ann. § 15-41-30(A)(7) unused
	& Putter (15-20 years old) Women's Ping Zing/Taylormade mixed set W/ bag & Putter Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	homestead
	clothes Line from Schedule A/B: 11.1	\$500.00		\$0.00	S.C. Code Ann. § 15-41-30(A)(3)
				100% of fair market value, up to any applicable statutory limit	· // /
	costume jewelry Line from Schedule A/B: 12.1	\$1,500.00		\$1,500.00	S.C. Code Ann. § 15-41-30(A)(4)
				100% of fair market value, up to any applicable statutory limit	· ///
	Kawai Electronic Piano W/ bench Piano is Approx 28 years old	\$1,150.00		\$1,150.00	S.C. Code Ann. § 15-41-30(A)(7) unused
	Ebay value: \$1149.00 Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	homestead
	IRA: IRA (2 accounts)	\$0.00		\$3,631.00	S.C. Code Ann. § 15-41-30(A)(13)
	no balance at this time Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance Line from Schedule A/B: 31.1	\$0.00		\$0.00	S.C. Code Ann. § 15-41-30(A)(8)
				100% of fair market value, up to any applicable statutory limit	
	various hand and gardening tools Line from Schedule A/B: 53.1	\$400.00		\$800.00	S.C. Code Ann. § 15-41-30(A)(7) unused
				100% of fair market value, up to any applicable statutory limit	homestead

Debtor 1

Document Page 11 of 43

Robert T Carlson
Mary M Carlson
Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

Case 17-03874-hb

Yes

Doc 10

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

		Do	cument P	age 12	of 43			
Fill in this inforn	nation to identify you	ır case:						
Debtor 1	Robert T Carlso	n						
	First Name	Middle Name	La	st Name				
Debtor 2	Mary M Carlson	ı						
(Spouse if, filing)	First Name	Middle Name	La	st Name				
United States Bar	nkruptcy Court for the:	DISTRICT OF S	OUTH CAROLINA					
Case number								
(if known)							neck if this is an nended filing	
Official Form	n 106D							
	D: Creditors	Who Have	Claims Se	cured	by Propert	V	12/15	
Be as complete and	d accurate as possible. le Additional Page, fill it d	If two married people	are filing together, b	ooth are equ	ally responsible for su	ipplying correct info		
I. Do any creditors	have claims secured by	y your property?						
☐ No. Check	this box and submit th	his form to the court	with your other sch	edules. Yo	u have nothing else t	o report on this for	m.	
■ Yes. Fill in	all of the information l	below.						
Part 1: List Al	II Secured Claims							
	claims. If a creditor has r	more than one secured	claim list the creditor	r senarately	Column A	Column B	Column C	
for each claim. If m	ore than one creditor has ist the claims in alphabetic	a particular claim, list	the other creditors in F		Amount of claim Do not deduct the value of collateral.	Value of collatera that supports this claim		
2.1 Wells Far		Describe the proper	ty that secures the o	claim:	\$544,312.00	\$0.0	00 \$544,312.00	
PO Box 64 Carol Stre	426 eam, IL 60197	As of the date you f apply.  Contingent	ile, the claim is: Chec	ck all that				
Number, Street	, City, State & Zip Code	☐ Unliquidated						
Who owes the de	ebt? Check one	Disputed Nature of lien. Che	ck all that apply					
Debtor 1 only		_	u made (such as mort	gage or secu	ıred			
Debtor 2 only		car loan)	(	J. J				
■ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (suc	ch as tax lien, mechan	nic's lien)				
☐ At least one of the	he debtors and another	☐ Judgment lien fro	m a lawsuit					
☐ Check if this cl community de		Other (including a	right to offset)				·	
Date debt was inco	urred	Last 4 digits	of account number	5559				
Add the dollar va	alue of your entries in C	olumn A on this page	. Write that number	here:	\$544,31	12.00		
If this is the last Write that number	page of your form, add	the dollar value totals	from all pages.		\$544,31	12.00		
write that number	er nere:							
Part 2: List Oth	ners to Be Notified fo	r a Debt That You	Already Listed					
trying to collect fro	of if you have others to be om you for a debt you of for any of the debts that not fill out or submit th	we to someone else, you listed in Part 1, I	list the creditor in Pa	art 1, and the	en list the collection a	gency here. Similarl	ly, if you have more	
	ber, Street, City, State & 2			On which	ı line in Part 1 did you e	nter the creditor? 2	<u>.1_</u>	
	ownsend and Tho	mas PC			•			
O. DOX	O. Box 100200			Last 4 digits of account number				

Official Form 106D

Columbia, SC 29202

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

		Docume	nt Page 13 d	of 43		
Fill in this inform	nation to identify your					
Debtor 1	Robert T Carlson					
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2	Mary M Carlson				1	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	DISTRICT OF SOUTH (	CAROLINA			
0				<u>.</u>		
Case number (if known)						if this is an
>(:: .   F	4005/5					Ü
Official Form		U 11 11				4045
		ho Have Unsecue Part 1 for creditors with P				12/15
chedule G: Execut schedule D: Credito eft. Attach the Con ame and case nun	tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag	that could result in a claim. ired Leases (Official Form 1 ured by Property. If more sp le. If you have no informatio	06G). Do not include any pace is needed, copy the l	creditors with partially s Part you need, fill it out, i	secured claims that a number the entries in	re listed in
	ors have priority unsecure					
No. Go to Pa	• •	u ciaiilis agailist you?				
_	art 2.					
Yes.	nuinuity (manager)	• If a condition has seen at the condition			bifon and alaim For	a a ala aladas liaka d
identify what typ possible, list the	pe of claim it is. If a claim ha e claims in alphabetical orde	s. If a creditor has more than case both priority and nonpriority according to the creditor's nurticular claim, list the other creation.	amounts, list that claim he ame. If you have more than	re and show both priority a	and nonpriority amount	ts. As much as
(For an explana	ation of each type of claim, s	see the instructions for this for	m in the instruction booklet	•		
				Total claim	Priority amount	Nonpriority amount
2.1 <b>IRS</b>		Last 4 digits of	account number	\$9,172.00	\$9,172.00	\$0.00
•	editor's Name					
	zed & Insolvency	When was the	debt incurred?		-	
Operation P.O. Bo						
	k 7340 Iphia, PA 19114					
	treet City State Zlp Code	As of the date	you file, the claim is: Che	ck all that apply		
Who incurred	the debt? Check one.	☐ Contingent				
Debtor 1 o	nly	☐ Unliquidated				
Debtor 2 o	nly	☐ Disputed				
Debtor 1 a	nd Debtor 2 only		ITY unsecured claim:			
_	ne of the debtors and another		pport obligations			
_		_				
	his claim is for a commu	_	ertain other debts you owe eath or personal injury while	J		
No	subject to offset?			e you were intoxicated		
☐ Yes		Other. Speci	2014/2015 INCO	ME TAYES		
La Tes			2014/2013 114001	INIL TAXLO		
Part 2: List Al	I of Your NONPRIORIT	Y Unsecured Claims				
3. Do any credito	ors have nonpriority unsec	cured claims against you?				
☐ No. You hav	ve nothing to report in this p	art. Submit this form to the co	urt with your other schedule	es.		
Yes.						
		aims in the alphabetical ord y for each claim. For each clai				

than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 14 of 43

Mary M Carlson	Case number (if know)	
American Express	Last 4 digits of account number 2005	\$5,56 <sup>2</sup>
Nonpriority Creditor's Name PO Box 650448 Dallas, TX 75265	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify charge	
BANK OF AMERICA	Last 4 digits of account number 1861	\$39,129
Nonpriority Creditor's Name PO BOX 982235 EI Paso, TX 79998	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify charge	
Bank of America	Last 4 digits of account number 4328	\$10,515
Nonpriority Creditor's Name P.O. Box 2518	When was the debt incurred?	<b>4.0,0.0</b>
Houston, TX 77252  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify charge	

Mary M Carlson	Case number (if know)	
Bank of America	Last 4 digits of account number 5091	\$23,7
Nonpriority Creditor's Name P.O. Box 15710 Wilmington, DE 19886-5710	When was the debt incurred?	
Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify charge	
CAROLYN CARLSON	Last 4 digits of account number	\$19, <sup>1</sup>
Nonpriority Creditor's Name 907 Washington St. Glenview, IL 60025	When was the debt incurred?	. ,
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify unsecured debt	
Chase	Last 4 digits of account number 8929	\$36,0
Nonpriority Creditor's Name P.O. Box 15298	When was the debt incurred?	
Wilmington, DE 19850	which was the dept incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		

☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community  $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims debt Is the claim subject to offset?  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify charge

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 16 of 43

	2 Mary M Carlson	Case number (if know)					
4.7	Chase Card Services Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850	Last 4 digits of account number 4268  When was the debt incurred?	\$19,928.00				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	□ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	Other. Specify charge					
4.8	Chase Cardmember Services	Last 4 digits of account number	\$17,453.00				
	Nonpriority Creditor's Name PO Box 15153 When was the debt incurred? Wilmington, DE 19886						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	$\square$ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify charge					
			******				
4.9	Discover Card Nonpriority Creditor's Name PO Box 71084	Last 4 digits of account number 9505  When was the debt incurred?	\$11,466.00				
	Charlotte, NC 28272  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes						
	<b>□</b> 169	Other. Specify charge					

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 17 of 43

	or 2 Mary M Carlson	Case number (if know)	
4.1 0	Wells Fargo	Last 4 digits of account number 0001	\$17,041.00
<u> </u>	Nonpriority Creditor's Name PO Box 98751	When was the debt incurred?	
	Las Vegas, NV 89193  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify personal loan	
4.1 1	Wells Fargo	Last 4 digits of account number	\$10,830.00
•	Nonpriority Creditor's Name P.O. Box 98791	When was the debt incurred?	·
	Las Vegas, NV 89193  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		charge	
	Yes	Other. Specify _pending law suit	
4.1 2	Wells Fargo	Last 4 digits of account number 3237	\$8,797.00
	Nonpriority Creditor's Name P.O. Box 14487	When was the debt incurred?	
	Des Moines, IA 50306  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify charge	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 18 of 43

Debtor 1 Robert T Carlson Debtor 2 Mary M Carlson		Case number (if know)				
have more than one creditor for any of the denotified for any debts in Parts 1 or 2, do not f		the additional creditors here. If you do not have additional persons to be				
Name and Address	· · · · · · · · · · · · · · · · · · ·	2 did you list the original creditor?				
Smith Debnam	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
P.O. Box 26268 Raleigh, NC 27611		■ Part 2: Creditors with Nonpriority Unsecured Claims				
rtaicign, rto 27011	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
UNITED STATES ATTORNEY'S	Line <b>2.1</b> of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims				
OFFICE		☐ Part 2: Creditors with Nonpriority Unsecured Claims				
ATTN: DOUG BARNETT, ESQ. 1441 Main St.						
Columbia, SC 29201						
	Last 4 digits of account number					
Name and Address	· · · · · · · · · · · · · · · · · · ·	2 did you list the original creditor?				
US DEPT OF JUSTICE	Line <b>2.1</b> of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims				
950 Pennsylvannia Av. NW Washington, DC 20530		☐ Part 2: Creditors with Nonpriority Unsecured Claims				
<b>J</b> ,	Last 4 digits of account number					

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 9,172.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 9,172.00
	01	On the other con-	01	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 219,660.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 219,660.00

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert T Carlson			
	First Name	Middle Name	Last Name	
Debtor 2	Mary M Carlson			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA	
Case number				
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	,				
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	- ")			2 0000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main

		Docume	ent Page 20 d	of 43	
Fill in this	information to identify your	r case:			
Debtor 1	Robert T Carlson	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Mary M Carlson First Name	Middle Name	Last Name		
	<i>5,</i>				
United State	es Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case numb	per				
(if known)				☐ Check if this is	
				amended filing	
Official	Form 106H				
		lobtoro			40/45
Schea	ule H: Your Cod	iebiois			12/15
	and case number (if known			as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have yo a, California, Idaho, Louisiana			<b>y?</b> (Community property states and territories incluington, and Wisconsin.)	ade
	Go to line 3. Did your spouse, former spo	ouse, or legal equivalent liv	e with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	if your spouse is filing with you. List the perso sure you have listed the creditor on Schedule D 16G). Use Schedule D, Schedule E/F, or Schedu	O (Official
	Column 1: Your codebtor lame, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe to Check all schedules that apply:	he debt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
<u> </u>	Number Street			_	
C	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
<u></u>	Number Street			_	
C	City	State	ZIP Code		

## Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 21 of 43

Fill	in this information to identify you	case:				ı				
	btor 1 Robert T (									
1	btor 2 Mary M Ca	rlson			_					
Un	ited States Bankruptcy Court for t	ne: DISTRICT OF SOUTH	H CAROLINA							
	se number nown)		-			□ Ai	k if this is n amende suppleme 3 income	ed filing ent showin	ng postpetition ollowing date:	chapter
0	fficial Form 106I					M	M / DD/ \	YYY		
S	chedule I: Your In	come								12/1
spo atta	plying correct information. If you are separated and you had a separate sheet to this form the separate sheet to the separate sheet	our spouse is not filing wi n. On the top of any additi	ith you, do not inclu onal pages, write y	ıde infori	mati	on about	your spo imber (if	ouse. If me known). <i>A</i>	ore space is Answer every	needed,
	information.		Debtor 1						iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed  ■ Not employed				☐ Employed  ■ Not employed			
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name								
	Occupation may include studer or homemaker, if it applies.	t Employer's address								
		How long employed the	here?				_			
Pa	rt 2: Give Details About M	onthly Income								
spo	imate monthly income as of the use unless you are separated. ou or your non-filing spouse have se space, attach a separate sheet	more than one employer, co		•				·	·	-
11101	e space, allacit a separate sheet	to uno torrit.				For Deb	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthl			2.	\$		0.00	\$	0.00	-
3.	Estimate and list monthly over	ertime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$		0.00	\$	0.00	

Deb Deb	tor 1 tor 2	Robert T Carlso Mary M Carlson			C	ase number (if know	n)			
	Cop	oy line 4 here		4.		For Debtor 1	0	For Debto		
5.	l ict	all payroll deduct	ione:							
5.				<b>-</b> -	,	Φ 0.0	_	Ф	0.00	
	5a. 5b.		and Social Security deductions ributions for retirement plans	5a. 5b.		\$		\$ \$	0.00	
	5c.	•	ibutions for retirement plans	5b. 5c.		\$\$ \$0.0	_	\$	0.00	
	5d.	-	ments of retirement fund loans	5d.		\$ 0.0 \$	_	\$	0.00	
	5e.	Insurance	ments of retirement runa loans	5a. 5e.		\$ 0.0 \$	_	\$	0.00	
	5f.	Domestic suppo	ort obligations	5f.		\$ 0.0	_	\$	0.00	
	5g.	Union dues	<b>3</b>	5g.	9	\$ 0.0	_	\$	0.00	
	5h.	Other deduction	ns. Specify:	5h.			<u> </u>	+ \$	0.00	
6.	Add	I the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	\$ 0.0	0	\$	0.00	
7.	Cal	culate total month	ly take-home pay. Subtract line 6 from line 4.	7.	\$	\$0.0	0	\$	0.00	
8.	List 8a.	Net income from profession, or fa Attach a stateme	ent for each property and business showing gross or and necessary business expenses, and the total	8a.	,	\$ 0.0	•	\$	0.00	
	8b.	Interest and div		8b.		\$ 0.0 \$		\$	0.00	
	8c.	regularly received Include alimony, settlement, and p	spousal support, child support, maintenance, divorce property settlement.	8c.		\$0.0	0	\$	0.00	
	8d.	Unemployment	compensation	8d.		\$0.0		\$	0.00	
	8e. 8f.	Include cash ass that you receive, Nutrition Assistar Specify:	ent assistance that you regularly receive istance and the value (if known) of any non-cash assis such as food stamps (benefits under the Supplementance Program) or housing subsidies.	al 8f.	Ç	\$1,680.0 \$0.0	0	\$	0.00	
	8g.	Pension or retire		8g.		\$ 0.0		\$	0.00	
	8h.	Other monthly in	ncome. Specify:	8h.	+ :	\$	0 +	+ \$	0.00	
9.	Add	I all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,680.0	0	\$	1,762.00	
10.			ome. Add line 7 + line 9. 0 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	<u> </u>	1,680.00 +	\$_	1,762.00	= \$	3,442.00
11.	Inclu othe Do r	ude contributions fro er friends or relative	contributions to the expenses that you list in Schom an unmarried partner, members of your household s. Dounts already included in lines 2-10 or amounts that ar	, your deper		•		ed in <i>Schedu</i>	ele J. +\$	0.00
12.		e that amount on th	e last column of line 10 to the amount in line 11. The Summary of Schedules and Statistical Summary of						\$	3,442.00
13.	Do :	you expect an incr No.	rease or decrease within the year after you file this	form?					Combir monthly	ed y income
		Yes. Explain:	Debtors have substantial equity and have the of the creditors back with the proceeds of the lin addition, Debtors are applying for a loan.	ne sale. Ex	хре	ected sale with			thay car	pay all

Fill in t	this informa	tion to identify yo	our case.			1		
		, ,				01		
Debtor	1	Robert T Car	rison			Che □	ck if this is:  An amended filing	
Debtor	2	Mary M Carls	son				A supplement show	wing postpetition chapter
(Spous	se, if filing)						13 expenses as of	the following date:
United	States Bankr	uptcy Court for the	: DISTRI	CT OF SOUTH CAROLINA	Α		MM / DD / YYYY	
Case n								
(If know	vn)							
Offi	cial Fo	rm 106J						
		J: Your	 Exper	ises				12/1
Be as inform	complete a nation. If m er (if know	and accurate as ore space is ne n). Answer ever	s possible. eded, atta ry questio	. If two married people ar ch another sheet to this				
Part 1:	Descr s this a joir	ibe Your House	∌hold					
	J No. Go to							
			in a separ	ate household?				
	■ N		·					
	,	•	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	otor 2.	
o <b>n</b>	a van baw	a damandanta?	<b>=</b>					
	•	e dependents?	_	E11	<b>5</b>		B I	<b>5</b>
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relating Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
D	Oo not state	the						□ No
	lependents							☐ Yes
								□ No
								☐ Yes ☐ No
								☐ No
								□ No
								☐ Yes
		enses include f people other t	han	No				
		d your depende		Yes				
Part 2:	Estim	ate Your Ongoi	ina Month!	v Expenses				
Estima expen	ate your ex	penses as of y	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
				government assistance in cluded it on Schedule I:				
	ial Form 10						Your exp	enses
		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	e 4.	\$	4,204.00
If	f not includ	led in line 4:						
4	la. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
			•	ipkeep expenses		4c.	·	55.00
		owner's associat			me equity loops	4d. 5.		32.00
J. A	auditional f	norigage paym	cure in Ac	our residence, such as ho	me equity loans	Э.	Ψ	0.00

## Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 24 of 43

	Case numb	ber (if known)	
	6a.	\$	250.00
		·	35.00
ellite, and cable services			200.00
,	6d.	\$	0.00
		·	575.00
ts			0.00
-		·	100.00
		·	100.00
		·	100.00
e, bus or train fare.			
o, but of fram fare.	12.	\$	275.00
papers, magazines, and books	13.	\$	100.00
Ionations	14.	\$	0.00
our pay or included in lines 4 or 20.			
		•	3.00
			208.00
		·	112.00
	15d.	\$	299.00
n your pay or included in lines 4 or 20.		_	
	16.	\$	7.00
	47-	Φ.	
			0.00
		·	0.00
		·	0.00
		\$	0.00
		\$	0.00
	<b>).</b>		0.00
illers who do not live with you.	10	Ψ	0.00
led in lines 4 or 5 of this form or on Sc		ur Income	
			0.00
		·	0.00
nsurance			0.00
		· -	0.00
•		·	0.00
illinairi daoo		·	0.00
		- Ψ	0.00
		\$	6,655.00
ebtor 2), if any, from Official Form 106J-2	2	\$	
our monthly expenses.		\$	6,655.00
h. inaamaa) frans Cabaadula I	00-	ф	0.440.00
			3,442.00
ne 22c above.	230.	-\$	6,655.00
m your monthly income			
			-3,213.00
	23c.	\$	-3,213.00
n your monting income. ne.	23c.	\$	-3,213.00
ne. in your expenses within the year after	you file this	form?	
ne.	you file this	form?	
ne. in your expenses within the year after	you file this	form?	
	e, bus or train fare.  papers, magazines, and books  contions  our pay or included in lines 4 or 20.  perm Care (for both)  n your pay or included in lines 4 or 20.  et and support that you did not report dule I, Your Income (Official Form 106I thers who do not live with you.  led in lines 4 or 5 of this form or on Sometimes and the second in lines 4 or 5 of this form or on Sometimes and the second in lines 4 or 5 of this form or on Sometimes and lines are penses of the second in lines 4 or 5 of this form or on Sometimes and lines are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or on Sometimes are penses of the second in lines 4 or 5 of this form or	ellite, and cable services  fis 8.  fis 8.  g.  g.  g. bus or train fare.  fighers, magazines, and books 13.  flonations 14.  florations 15.  form Care (for both) 15.  form Care (for both) 15.  form Care (for both) 16.  form Care (for both) 17.  form Care (for both) 17.  form Care (for both) 18.  form Care (for both) 19.  florations 18.  florations 19.  florations	## sellite, and cable services    60.

## Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 25 of 43

Fill in this info	ormation to identify your	case:			
Debtor 1	Robert T Carlson				
	First Name	Middle Name	Las	t Name	_
Debtor 2 (Spouse if, filing)	Mary M Carlson First Name	Middle Name	Las	t Name	_
United States	Bankruptcy Court for the:	DISTRICT OF SOUTH	H CAROLINA		_
Case number (if known)					☐ Check if this is an amended filing
Official Fo	rm 106Dec				
Declara	ation About a	n Individua	I Debte	or's Schedules	12/15
years, or both	iey or property by fraud in . 18 U.S.C. §§ 152, 1341, 1	connection with a bai	nkruptcy cas	e can result in fines up to \$2	250,000, or imprisonment for up to 20
Did you		one who is NOT an atte	orney to help	you fill out bankruptcy form	ns?
■ No				<b></b>	
☐ Yes	. Name of person				n Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the su	mmary and s	chedules filed with this dec	laration and
X /s/R	obert T Carlson		х	/s/ Mary M Carlson	
	ert T Carlson ture of Debtor 1			Mary M Carlson Signature of Debtor 2	

Date August 17, 2017

Date August 17, 2017

## Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 26 of 43

Fill	in this inforn	nation to identify you	r case:			
Deb	otor 1	Robert T Carlso	n			
Dok	otor 2	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	Mary M Carlson First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	DISTRICT OF SOUTH C	AROLINA		
Cas	se number					
(if kn	own)				_	heck if this is an mended filing
$\sim$ t	tialal Fa	was 407				
	ficial Fo		Affaire for Indivi	duals Filing for E	ankruntev	4/16
					equally responsible for sup	
info	rmation. If m	ore space is needed,	attach a separate sheet to		y additional pages, write you	
		n). Answer every que				
			rital Status and Where You	I Lived Before		
1.	What is you	r current marital statu	s?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	I.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
<b>3.</b> state					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (C	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	u received from all jobs and	ng a business during this y all businesses, including part re together, list it only once u		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calenda nuary 1 to De	r year: ecember 31, 2016)	■ Wages, commissions, bonuses, tips	\$362.00	■ Wages, commissions, bonuses, tips	\$4,599.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 27 of 43

	tor 1 otor 2		bbert T Carlso ary M Carlson			C:	ase number (if known)		
					D. ( )		5.17		
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
			dar year before December 31,		☐ Wages, commissions, bonuses, tips	\$0.00	Wages, combonuses, tips	ımissions,	\$43,799.00
					☐ Operating a business		☐ Operating a	business	
5.	Inclu and winn	other other nings. each s	come regardless public benefit pa lf you are filing a source and the g	s of wheth ayments; p a joint cas gross inco	e during this year or the two er that income is taxable. Ex- pensions; rental income; inte e and you have income that me from each source separa	amples of other income are rest; dividends; money coll you received together, list	e alimony; child supp ected from lawsuits; it only once under D	royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery
		Yes.	Fill in the details	S.					
					Debtor 1		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
			/ 1 of current ye filed for bankru		SSI	\$11,766.00	) SSI		\$12,333.00
			dar year: December 31,	2016)	SSI	\$20,533.00	) SSI		\$21,142.00
					IRA WITHDRAWAL	\$363.00	) IRA WITHDR	AWAL	\$4,962.00
Par	t 3:	List	t Certain Payme	ents You	Made Before You Filed for	Bankruptcy			
6.	Are	<b>eithe</b> i No.	Neither Debto	r 1 nor D	s debts primarily consume ebtor 2 has primarily conse personal, family, or househo	u <mark>mer debts.</mark> Consumer de	ebts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			_ `	days befo	re you filed for bankruptcy, d	id you pay any creditor a to	otal of \$6,425* or mo	re?	
			pa no	id that creating in the include	ach creditor to whom you pa editor. Do not include paymen payments to an attorney for t on 4/01/19 and every 3 year	nts for domestic support ob his bankruptcy case.	oligations, such as ch	nild support a	and alimony. Also, do
		Yes.	Debtor 1 or De	ebtor 2 o	r both have primarily consure you filed for bankruptcy, d	umer debts.		·	
			_	,		. , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				to line 7					
			ind	clude payı	ach creditor to whom you pa ments for domestic support o this bankruptcy case.				
	Cre	editor'	s Name and Ac	Idress	Dates of payme	ent Total amount	Amount you	Was this p	payment for

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 28 of 43

Debtor 1 Robert T Carlson

De	btor 2 Mary M Carlson		Case number (if known)	
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partnerships of which your more of their voting securities; and a	ou are a general partner; corporation ny managing agent, including one fo
	No			
	Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount	Reason for this payment
	insider 5 Name and Address	bates of payment	Total amount Amount you paid still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No		ments or transfer any property on a	ccount of a debt that benefited an
	☐ Yes. List all payments to an insider			
	Insider's Name and Address	Dates of payment	Total amount Amount you paid still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures		
Га				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.			
	□ No			
	Yes. Fill in the details.			
	Case title	Nature of the case	Court or agency	Status of the case
	Case number	00115051010		
	WELLS FARGO V MARY CALRSON	COLLECTIONS	Greenville County Clerk of Court	■ Pending
			P.O. Box 757	☐ On appeal ☐ Concluded
			Greenville, SC 29602	- Concluded
	WELLS FARGO V ROBERT/MARY	FORECLOSURE	Greenville County Clerk of	■ Danding
	CARLSON		Court	<ul><li>■ Pending</li><li>□ On appeal</li></ul>
			P.O. Box 757	☐ Concluded
			Greenville, SC 29602	0.1.5 0.15 11101105 00.15
				SALE DATE: AUGUST, 2017
	THE CLIFFS COMMUNITY ASSOC	HOA DUES	Greenville County Clerk of	☐ Pending
	V MARY/ROBERT CARLSON		Court	☐ On appeal
	2015-CP-23-04605		P.O. Box 757	☐ Concluded
			Greenville, SC 29602	
	DISCOVER V ROBERT CARLSON	COLLECTIONS	Greenville County Clerk of	Pending
	2016-CP-2304807		Court	☐ On appeal
			P.O. Box 757 Greenville, SC 29602	☐ Concluded
	SPARTA GP HOLDINGS REO	COLLECTIONS	Greenville County Clerk of	☐ Pending
	CORP V MARY CARLSON		Court	On appeal
	2016-CP-2305894		P.O. Box 757 Greenville, SC 29602	☐ Concluded
			J. 551171115, 55 25502	

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Page 29 of 43 Document Debtor 1 Robert T Carlson Debtor 2 Mary M Carlson Case number (if known) 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. Creditor Name and Address Date action was Describe the action the creditor took Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your lost how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers

Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

Yes. Fill in the details.

**Person Who Was Paid** Address **Email or website address** Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made

Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

## Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 30 of 43

Debtor 1 Robert T Carlson
Debtor 2 Mary M Carlson

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and votransferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	STONE LAW FIRM, LLC PO BOX 3884 Irmo, SC 29063	Paid \$1200 Lega	al fees		07/2017	\$1,200.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you like	or to make payments			r transfer any proper	ty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and vertransferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li  No  Yes Fill in the details	iness or financial affa e as security (such as the	irs? he granting of a			
	Person Who Received Transfer	Description and v	alue of	Describe a	any property or	Date transfer was
	Address Person's relationship to you	property transferr			received or debts	made
	NAME NOT KNOWN	WILLIAMS PIN E for \$2999 on EB	_	WILLAIM GAME	S PIN BALL	08/17/2016
	NONE					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No  Yes. Fill in the details.		y property to a	self-settled tru	st or similar device o	of which you are a
	Name of trust	Description and v	alue of the prop	erty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa  No	other financial accour	nts; certificates	of deposit; sh		
	Yes. Fill in the details.  Name of Financial Institution and L.	ast 4 digits of	Type of accou	nt or Dat	te account was	Last balance
		ccount number	instrument	clo	sed, sold, ved, or nsferred	before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, an	y safe deposit	box or other deposi	tory for securities,
	No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe the o	contents	Do you still have it?

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 31 of 43

Debtor 1 Robert T Carlson Debtor 2 Mary M Carlson

Case number (if known)

22.	_	e you stored property in a storage unit or pl	ace other than your home within 1	year befor	re you filed for bankruptcy	?
		No Yes. Fill in the details.				
	- Na	me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe	the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control for	·			
23.		you hold or control any property that someo someone.	one else owns? Include any proper	ty you bori	rowed from, are storing for	r, or hold in trust
		No Yes. Fill in the details.				
	_	rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe	the property	Value
Par	t 10:	Give Details About Environmental Informa	ation			
For	the p	ourpose of Part 10, the following definitions	apply:			
_	toxi	ironmental law means any federal, state, or c substances, wastes, or material into the a ulations controlling the cleanup of these sub	ir, land, soil, surface water, ground			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.					
		<i>ardous material</i> means anything an environ ardous material, pollutant, contaminant, or s		waste, ha	zardous substance, toxic s	substance,
Rep	ort a	Il notices, releases, and proceedings that yo	ou know about, regardless of wher	they occu	urred.	
24.	Has	any governmental unit notified you that you	u may be liable or potentially liable	under or i	n violation of an environm	ental law?
	=	No				
	□ Na:	Yes. Fill in the details.	Cavaramental unit	Emilia	anmental law if you	Data of nation
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	_	onmental law, if you it	Date of notice
25.	Hav	e you notified any governmental unit of any	release of hazardous material?			
		No Yes. Fill in the details.				
	LI Na	me of site	Governmental unit	Envir	onmental law if you	Date of notice
		dress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	_	onmental law, if you it	Date of Hotice
26.	Hav	e you been a party in any judicial or adminis	strative proceeding under any envi	ronmental	law? Include settlements	and orders.
		No Yes. Fill in the details.				
	-	se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case
Par	t 11:	Give Details About Your Business or Con	nections to Any Business			
27.	Witl	nin 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the fo	llowing connections to any	y business?
		lacksquare A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-	-time or part-time	
		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)		
Offici	ol Eo	m 107 Statement of	of Financial Affairs for Individuals Filing	for Bankru	ntcv	nage

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Page 32 of 43 Document Debtor 1 Robert T Carlson Mary M Carlson Debtor 2 Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert T Carlson /s/ Mary M Carlson Robert T Carlson Mary M Carlson Signature of Debtor 1 Signature of Debtor 2 Date August 17, 2017 August 17, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	otor 1 Robert T Carlson				
Debtor 2 Mary M Carlson (Spouse, if filing)					
United States B	ankruptcy Court for the: District of South Carolina				
Case number (if known)					

Check	Check as directed in lines 17 and 21:						
1	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Column Debtor		Column Debtor non-fili	_
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissio	ons (before all	\$	0.00	\$	0.00
<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	de payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househand roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3 Net income from operating a business,	ort. Includ old, your spouse o	le regulaı depende	contributions nts, parents,	\$	0.00	\$	0.00
profession, or farm	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or f	arm\$_	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
Net monthly income from rental or other real property	_	0.00	Copy here ->	r	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

### Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 34 of 43

Mary M Carlson Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 0.00 0.00 0.00 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 0.00 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 0.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 0.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 0.00 15b. The result is your current monthly income for the year for this part of the form.

**Robert T Carlson** 

Debtor 1

Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 35 of 43

Debtor Debtor	1		M Carlson	_	Case number (if known)		
16. (	Calc	ulate th	ne median family income that applies to yo	u. Follow these	steps:		
			he state in which you live.	SC			
	.ou.				<del></del>		
,	16b.	Fill in th	he number of people in your household.	2	_		
,		To find	ne median family income for your state and si a list of applicable median income amounts, tions for this form. This list may also be availa	go online using	the link specified in the separate	\$_	55,598.00
17. <b>I</b>	How	do the	e lines compare?				
,	17a.	•	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do NO				
,	17b.		Line 15b is more than line 16c. On the top of $1325(b)(3)$ . Go to Part 3 and fill out Calcula your current monthly income from line 14 above.	ation of Your D			
Part 3	3:	Calc	ulate Your Commitment Period Under 11 U	.S.C. § 1325(b)	(4)		
18. (	Сору	y your 1	total average monthly income from line 11			\$	0.00
(	conte	end that	marital adjustment if it applies. If you are not calculating the commitment period under 11 come, copy the amount from line 13.				
	•		narital adjustment does not apply, fill in 0 on li	ne 19a.		-\$	0.00
,	19b.	Subtra	ct line 19a from line 18.			\$	0.00
20. (	Calc	ulate y	our current monthly income for the year.	Follow these ste	ps:		
2	20a.	Copy li	ne 19b			\$_	0.00
		Multiply	y by 12 (the number of months in a year).				<b>x</b> 12
2	20b.	The res	sult is your current monthly income for the yea	ar for this part of	the form	\$_	0.00
							55 500 00
2	20c.	Copy th	he median family income for your state and si	ze of household	from line 16c	\$_	55,598.00
2	21.	How d	o the lines compare?				
			ne 20b is less than line 20c. Unless otherwise eriod is 3 years. Go to Part 4.	e ordered by the	court, on the top of page 1 of this form,	check box 3,	The commitment
			ne 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise or	dered by the court, on the top of page 1	of this form, c	heck box 4, The
Part 4	4:	Sign	Below				
E	3y si	gning h	nere, under penalty of perjury I declare that the	e information on	this statement and in any attachments is	s true and cor	rect.
X	/s/	Rober	t T Carlson		X /s/ Mary M Carlson		
^	Ro	bert T	Carlson	<u> </u>	Mary M Carlson		
	·		of Debtor 1		Signature of Debtor 2		
[	Jate		ust 17, 2017 DD / YYYY		Date August 17, 2017 MM / DD / YYYY		
I	f you		ed 17a, do NOT fill out or file Form 122C-2.				
ı	f you	ı check	ed 17b, fill out Form 122C-2 and file it with the	s form. On line	39 of that form, copy your current monthl	ly income fror	n line 14 above.

**Robert T Carlson** 

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		r 7:	Liquidation
		\$245	filing fee
		\$75	administrative fee
	+	\$15	trustee surcharge
		\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-03874-hb Doc 10 Filed 08/17/17 Entered 08/17/17 10:29:16 Desc Main Document Page 40 of 43

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**District of South Carolina

In	re	Robert T Carlso Mary M Carlson					Case No.		
	-	Mary W Carison			Debto	r(s)	Chapter	13	
		DICC	T O	CLIDE OF COMP	ENICATION O	E ATTODNIE	W EOD DI	EDTAD(C)	
		DISC	LU	SURE OF COMP	ENSATION O	F ATTORNE	AY FUR DI	ZBIOK(S)	
1.	con	npensation paid to i	ne w	9(a) and Fed. Bankr. P. 20 ithin one year before the fedebtor(s) in contemplation	iling of the petition in	n bankruptcy, or ag	greed to be paid	to me, for services	
		For legal services	, I ha	ve agreed to accept			\$	4,000.00	
		Prior to the filing	of th	is statement I have receive	ed		\$	1,200.00	
		Balance Due					\$	2,800.00	
2.	The	source of the com	pensa	ation paid to me was:					
		Debtor		Other (specify):					
3.	The	source of compen	satior	to be paid to me is:					
		Debtor		Other (specify):					
4.		I have not agreed t	o sha	are the above-disclosed co	mpensation with any	other person unles	s they are mem	bers and associates	of my law firm.
				he above-disclosed compe together with a list of the					law firm. A
5.	In r	return for the above	-disc	losed fee, I have agreed to	o render legal service	for all aspects of t	he bankruptcy o	case, including:	
	b. c.	Preparation and fili Representation of t [Other provisions a Negotiation reaffirmation	ng of he de s nee s wi n ag	financial situation, and ref any petition, schedules, s btor at the meeting of cred ded] th secured creditors to preements and applica avoidance of liens on	statement of affairs and ditors and confirmation reduce to marketions as needed;	nd plan which may on hearing, and any et value; exempt preparation and	be required; y adjourned hea ion planning;	rings thereof;	I filing of
5.	Ву	Representa	tion	or(s), the above-disclosed of the debtors in any sary proceeding.				es, relief from st	ay actions or
					CERTIFICAT	TION			
this		rtify that the forego cruptcy proceeding		s a complete statement of	any agreement or arr	rangement for payn	nent to me for r	epresentation of the	debtor(s) in
	Aug	ust 17, 2017			/s/ Da	niel Stone			
	Date				Signati <b>STON</b> <b>7436</b> I Irmo,	el Stone ure of Attorney IE LAW FIRM, L BROAD RIVER F SC 29063 076565 Fax: 803	RD		
					danie	lstonelaw@gma			
					Name	of law firm			

### LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

### **United States Bankruptcy Court District of South Carolina**

In re	Mary M Carlson		Case No.	
	-	Debtor(s)	Chapter	13

### CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

nforma	ation to, the debtor's schedules, statements and	l lists which are being filed at this time or as they currently exist in draft
	Master mailing list of creditors submitted vi	a:
	(a) computer diskette	
	(b) scannable hard copy (number of sheets submitted	
	(c) X electronic version filed	l via CM/ECF
Date:	August 17, 2017	/s/ Robert T Carlson
		Robert T Carlson
		Signature of Debtor
Date:	August 17, 2017	/s/ Mary M Carlson
		Mary M Carlson
		Signature of Debtor
Date:	August 17, 2017	/s/ Daniel Stone
		Signature of Attorney
		Daniel Stone
		STONE LAW FIRM, LLC
		7436 BROAD RIVER RD
		Irmo, SC 29063
		8034076565 Fax: 8034073345
		Typed/Printed Name/Address/Telephone
		8077
		District Court I.D. Number

AMERICAN EXPRESS PO BOX 650448 DALLAS TX 75265

BANK OF AMERICA PO BOX 982235 EL PASO TX 79998

BANK OF AMERICA P.O. BOX 2518 HOUSTON TX 77252

BANK OF AMERICA P.O. BOX 15710 WILMINGTON DE 19886-5710

CAROLYN CARLSON 907 WASHINGTON ST. GLENVIEW IL 60025

CHASE P.O. BOX 15298 WILMINGTON DE 19850

CHASE CARD SERVICES P.O. BOX 15298 WILMINGTON DE 19850

CHASE CARDMEMBER SERVICES PO BOX 15153 WILMINGTON DE 19886

DISCOVER CARD PO BOX 71084 CHARLOTTE NC 28272

IRS
CENTRALIZED & INSOLVENCY OPERATION
P.O. BOX 7346
PHILADELPHIA PA 19114

ROGERS TOWNSEND AND THOMAS PC P.O. BOX 100200 COLUMBIA SC 29202

SMITH DEBNAM P.O. BOX 26268 RALEIGH NC 27611

UNITED STATES ATTORNEY'S OFFICE ATTN: DOUG BARNETT, ESQ. 1441 MAIN ST. COLUMBIA SC 29201

US DEPT OF JUSTICE 950 PENNSYLVANNIA AV. NW WASHINGTON DC 20530

WELLS FARGO PO BOX 98751 LAS VEGAS NV 89193

WELLS FARGO P.O. BOX 98791 LAS VEGAS NV 89193

WELLS FARGO P.O. BOX 14487 DES MOINES IA 50306

WELLS FARGO PO BOX 6426 CAROL STREAM IL 60197